

Contract for Child Care Services at Whistle Stop

Child's Name: _____

Room: _____ Beginning Date: _____

Day:	Mon.	Tues.	Wed.	Thur.	Fri.	Weekly Commitment
Approx. Times:_____	_____	_____	_____	_____	_____	
Tuition: \$_____	\$_____	\$_____	\$_____	\$_____	\$_____	\$_____

Financial Policy:

Payment is due in full on or before Friday of each week. If you would like to pay for several weeks at a time, you may do so provided you are paying in advance. A \$3.00 late fee per day will be charged to your account until payment is made in full.

Absences do not reduce tuition. We plan for, staff and prepare for your child whether s/he is here or not. Our cost are determined based on enrollment figures-not based on actual attendance. Your weekly commitment is due every week regardless of attendance.

There will be an overtime charge for children not picked up by 6:00 PM. A late fee of \$3.00 for every 5 minutes will be added to your account. This money goes directly to the staff member who stayed late with your child.

There is a \$10.00 service charge on all returned checks.

A non-refundable deposit equal to two weeks of service will be held. The deposit is applied to the last two weeks of service when we receive required notice.

Nutrition Policy:

A nutritious morning and afternoon snack is provided by Whistle Stop. You will be responsible for providing your child with a nutritious lunch. Whistle Stop provides milk available at lunch time.

Withdrawal Policy:

A written withdrawal notice is required for the director two weeks prior to withdrawal. In the event of withdrawal without written notice, the deposit will be applied to the two weeks after the last day of attendance.

We reserved the right to withdrawal a child after two weeks of nonpayment.

Contract Revisions:

Contract revisions may be requested. A center director will determine if a change is possible. Revisions will be documented on your contract with Whistle Stop.

Whistle Stop staff agree to provide each family with the best possible care and education. Parents are always welcome to visit and observe their children.

I have read and agree to the terms set forth in the Parent Handbook.

Contract as of (beginning day)_____

Registration Fee_____ **(non-refundable)**

Two weeks deposit_____ **(non-refundable)**

Total Due at Enrollment_____ **(Registration+Deposit+First week tuition)**

Cell Phone: _____ **Driver's License #:** _____ **Email Address:** _____
Mother: _____

Father: _____

Parent(s) Signature_____ **Date**_____

_____ **Date**_____

Director's Signature_____ **Date**_____

Office Use Only:

Emergency card:_____ **Health Appraisal:**_____ **Personal Information:**_____

WS contract:_____ **State of MI contract:**_____